



THE COMMONWEALTH OF MASSACHUSETTS
ALCOHOLIC BEVERAGES CONTROL COMMISSION
THIS SCHEDULE MUST BE TYPEWRITTEN OR PRINTED

SCHEDULE OF PRICES TO WHOLESALERS

Effective for the month of _____ 20__

This schedule is subject to such rules and regulations as the Alcoholic Beverages Control Commission has or may hereafter adopt.

The undersigned licensee (or his duly authorized representative) files the following schedule of prices pursuant to the requirements of Sections 25A and 25B, Chapter 138 of the General Laws, as amended. This schedule is signed under the penalties of perjury.

Date
(Street Address of licensed premises)

.....
(Name of Licensee) (City or Town)

Signed by
(Signature) (Massachusetts License or Certificate Number)

Type of Beverage and brand name	Capacity of Container	Where stated on label			PRICE		No. Of Bottles Per Case	Discount for Quantity
		Age	If a blend % and kind of Neutral Spirits	Proof or Alcoholic Content	Per bottle (if so sold)	Per Case		